

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Russ Young

Mailing Address 225 Timacuan Oaks Court

City State Zip Code
 Lake Mary FL 32746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central FL Regional Hospital

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : SA11AI.24793

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Sylvia Young

Mailing Address 9513 Verlaine Ct

City State Zip Code
 Las Vegas NV 89145

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunrise Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 08 / 2011

Transaction ID : SA11AI.25794

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Keith Zimmerman

Mailing Address 6708 Park Lane

City State Zip Code
 Dallas TX 75225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical City Dallas

Occupation

CDO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : SA11AI.25218

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

107375.00